



# TRANSMITTAL FORM

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|---------------------------|------------------|
| Application Serial Number | 10/689,165       |
| Filing Date               | October 20, 2003 |
| First Named Inventor      | Smith            |
| Group Art Unit            | 3742             |
| Examiner Name             | Paschall, M.     |
| Attorney Docket No.       | ASX-015C4        |
| Patent No.                | Not applicable   |
| Issue Date                | Not applicable   |

## ENCLOSURES (check all that apply)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form<br><input checked="" type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]<br><input type="checkbox"/> Petition for Extension of Time<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> Copies of IDS Citations<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)<br><input type="checkbox"/> Formal Drawing(s)<br><input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application<br><input type="checkbox"/> Small Entity Statement<br><input type="checkbox"/> CD(s) for large table or computer program<br><input type="checkbox"/> Amendment After Allowance | <input type="checkbox"/> Request for Certificate of Correction<br><input type="checkbox"/> Certificate of Correction (in duplicate)<br><input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><input type="checkbox"/> Appeal Brief (in triplicate)<br><input type="checkbox"/> Status Inquiry<br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8<br><input type="checkbox"/> Additional Enclosure(s) (please identify below) |
|--|---|--|

### CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 28<sup>th</sup> day of April, 2006.

Jean Gomez

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**PATENT**  
Attorney Docket No.: ASX-015C4

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|--------------|--|-------------------|--------------|
| APPLICANTS:  | Smith et al.                           | CONFIRMATION NO.: | 9462         |
| SERIAL NO.:  | 10/689,165                             | GROUP NO.:        | 3742         |
| FILING DATE: | October 20, 2003                       | EXAMINER:         | Paschall, M. |
| TITLE:       | TOROIDAL LOW-FIELD REACTIVE GAS SOURCE |                   |              |

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Supplemental Amendment**

This is in response to the Interview conducted with the Examiner on April 26, 2006. In the event any fees are due, the Commissioner is hereby authorized to charge any such fees to Attorney's Deposit Account No. 50-3081.

Applicants respectfully request entry of this Supplemental Amendment, in which:

**Amendments to the Claims** begin on page 2.

**Remarks** begin on page 4.